	<b>F</b>	236357
STATE OF SOUTH CAROLINA	)	350 33 ,
(G . I . 60 . )	) BEFOR	
(Caption of Case)  Example: Application for a Class C Charter Certificate from	PUBLIC SERVICE OF SOUTH	
John Doe dba Doe's Limo	j	
Request to Reinstate Class C Taxi Certificate	TRANSPORTATIO	N COVER SHEET
·	DOCKET	,
Carlos Rivera Lopez DBA Rivera Taxi	) NUMBER: 2008	. <u>237</u> _ T
	) If this is your first time filing an ap	cation with the PSC, you will no
	have a Docket Number. The Corum have filed with the Commission per	stion will assign one to you. If you
	and should be entered above.	oc, a Docker Number was assigned
(Please type or print) Submitted by: Carlos Lopez Rivera.	Delephone: 86	244-3013
Address: 1210 Pencreek Rd.	Fax:	
Saluda SC 29138	Mother:	,
	Smail:	
NOTE: The cover sheet and information contained herein neither repla as required by law. This form is required for use by the Public Service	ces por supplements the filing and er	v ce of pleadings or other papers e purpose of docketing and must
be filled out completely.  NATURE OF ACTIO	N (Check all that apply)	
Application - Class A/A Restricted	Request for Nun	Change on Certificate
Application - Class C Taxi	Request to Arre	Scope of Authority
Application - Class C Charter	Request to Arre	Tariff (rate increase, etc.)
Application - Class C Charter Bus	Request to Arec	Passenger Limit
Application - Class C Non-Emergency	Request	
Application - Class C Stretcher Van	Exhibit	
Application - Class E Household Goods	Late-Filed Extil	i.
Application - Class E Hazardous Waste	Letter	
Application	Proposed Order	,
Request for Extension to Comply with Order	Publisher's After	<b>ja</b> vít
Request for Order Granting Authority to Obtain a Certificate	Reservation Lett	e
of Public Convenience and Necessity to be Rescinded	Response	
Request for Cancellation of Certificate	Return to Peti	<b>3</b> C
Request for Suspension	Other:	AIL / DIVIC
Request for Reinstatement		
If you have any questions about this form, please contact the	PUBLIC SERVICE COMMI	SION at 803-896-5100.
Print Form	Reset Form	
Adaptive to the contract of th		L.I

otor Carrier Matters .O. Box 11649 olumbia, S.C. 29211 803) 896 – 5100 AX (803) 896-5199	1401 Main Street, Suite 900 Columbia, S.C. 29201 (803) 737-0578 FAX (803) 737-0815
ATE:	
lease consider this an application for Reinstate	ement of my:
Taxi Certificate Number 8035	
Charter Certificate Number	
Charter Bus Certificate Number	
Non-Emergency Certificate Number	
Stretcher Van Certificate Number	
My certificate was revoked/cancelled on(DAT	(E)
	DBA
(Name of Company)	— (If applicable)
210 Pencreek Rd. (Street Address)	(Mailing Address if different from Street Address)
m = 1.1 = CC 59138	(Signature)
Saluda SC 59138 (City, State, Zip Code)	
(Telephone Number)	Owner, President, etc.  ORS Revised 2-22-16
•	
	■ 11 ■

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STATE OF SOUTH CAROLINA

**Print Form** 

#### **CLASS C REINSTATEMENT FORM**

Pile the original with:

Public Service Commission of South Carolina
Clerk's Office
Motor Carrier Matters
P.O. Box 11649

S.C. Office of Regulatory Staff Transportation Department 1401 Main Street, Suite 900 Columbia, S.C. 29201

Mail or fax a copy to:



#### DAWN M. HIPP DIRECTOR TELECOMMUNICATIONS, TRANSPORTATION, WATERWASTEWAS

TÓ:

Carlos Rivera Lopez DBA Rivera Taxi

FROM:

Carole Chauvin, Transportation Department

DATE:

April 20, 2012

Fire Report Services

SUBJECT:

Requestito Reinstate Class C Taxi Certificate

Pursuant to your request to reinstate your Class C Taxi Certificate that was revoked on November 14, 2011, for failure to submit license decal fees for the Last Half Year 2011 enforcement period, relow is a list of instructions regarding reinstatement of certificates.

### Instructions for the SG Public Service Commission

- 1. There are two forms, a Transportation Cover Sheet and a Class C Reinstatement Form which the PSC requires be submitted. As you can see, our office has completed portions of both forms for you. Please review the forms carefully and complete all portions that I have not complete dismarked by an \* that has been circled).
- 2. Complete the 2011 Annual Report for the period of January 1, 2011 through the ember 14, 2011.

Once the three forms have been completed you may do one of the following:

- 1. Fax the forms to the Public Service Commission at 803-896-5199 to the attention of the Clerk's Office; or
- 2. Mail the forms to the following address:

Attn: Clerk's Office

Public Service Commission of S.C.

P.O. Box 11649

Columbia, S.C. 29211; or

3. Scan and email the completed forms to Janice.Schmleding@psc.sc.gov or trail desanty@psc.sc.gov

You may reach Janice at 803-896-5240, Tricia at 803-896-5125 or either one of the nat 803-896-5100. If you have any questions, you may contact me at 803-737-0578.

# Transportation CARRIER ANNUAL REPORT

CLASS C - TAXI - CHARTER - NON-EMERGENCY - STEETCHER VAN

Carlos Rivera Lopez DBA Rivera Take

Exact Legal Name of Respondent

4-20-12

Carrui ia requesting reinstatement of taki

PSC/ORS Number (leave blank)

Perteficule
#8035

## FOR THE YEAR ENDED 2011

[ ] Calendar Year Ending December 31, 2011 or

[ ] Fiscal Year Ending \_\_\_\_\_

Information reported in this Annual Reports
well be for

Ten-1, 2011

hru

Nov. 14, 2011